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FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/719,726
Filing Date	December 15, 2000
First Named Inventor	Paul Phillip Van Saarloos
Group Art Unit	
Examiner Name	
Attorney Docket Number	A33827 PCT USA

**ENCLOSURES (check all that apply)**

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input checked="" type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input checked="" type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers<br>(for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input checked="" type="checkbox"/> Petition under 37 CFR 1.47(b)<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication<br>to Group<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below):<br>(1) Combined Decl & Power<br>(2) Statement Establishing<br>Proprietary Interest..<br>(3) Statement of Facts... |
|---|---|---|

Remarks

Other Enclosures continued: 08/06/2001 MKAYPAGH 00000009 09719726  
(4) Notification of Missing Requirements 65.00 OP

08/06/2001 MKAYPAGH 00000009 09719726

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm  
or  
Individual nameBakerBotts LLP  
30 Rockefeller Plaza  
New York, NY 10112

Signature

Att Name: Richard G. Berkley  
PTO Reg: 25,465

Date

7-27-2001

**CERTIFICATE OF MAILING**

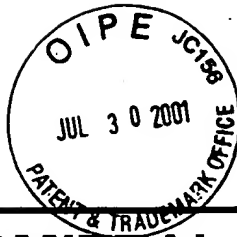
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 7-27-2001

Typed or printed name

Richard G. Berkley

Signature

Date 7-27-2001

**BAKER BOTTS LLP**

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ ) 1,140

**Complete if Known**

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Group Art Unit	
Attorney Docket No.	A33827 PCT USA

**METHOD OF PAYMENT**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-4377**  
 Deposit Account Name **Baker Botts LLP**

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
710	355	Utility filing fee	
320	160	Design filing fee	
490	245	Plant filing fee	
710	355	Reissue filing fee	
150	75	Provisional filing fee	

SUBTOTAL (1) (\$ ) 0

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	20** = 0	X	0
Multiple Dependent	3** = 0	X	0

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
80	40	Independent claims in excess of 3
270	135	Multiple dependent claim, if not paid
80	40	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ ) 0

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	65
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	945
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,240	620	Petition to revive - unintentional	
1,240	620	Utility issue fee (or reissue)	
440	220	Design issue fee	
600	300	Plant issue fee	
130	130	Petitions to the Commissioner	130
50	50	Processing fee under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
710	355	For each additional invention to be examined (37 CFR § 1.129(b))	
710	355	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ ) 1,140

**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Richard G. Berkley	Registration No. (Attorney/Agent)	25,465	Telephone	212.408.2554
Signature	<i>Richard G. Berkley</i>	Date	7-27-2001		

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